Please relet to Section V. Line-by-Line instructions for Completing EPA Fighs 8709-12 Before completing this form. The information rightested here is required by law (Section 3019 of the Recovery Act) Notification of Regulated **Date Received** (For Official Use Only) Waste Activity United States Environmental Protection Agency I. Installation's EPA ID Number (Mark 'X' in the appropriate box) C. Installation's EPA ID'Number B. Subsequent Notification XX Attributed Notification (Complete Item C) II. Name of installation (include company and specific site name) HE N E III. Location of Installation (Physical address not P.O. Box or Route Number) 4 P R 0 S P Ε С S T Т 2 8 R Ε Ε Street (Continued) Zip Code City of Town 2100 State To the second 0 R G A N T 0 W W V 2 N 5 0 6 6 County Code County Name М 0 N 0 N G Α Α IV. Installation Mailing Address (See Instructions) 1.5 Street or P.O. Box 0 В 0 X 6 4 2 City or Town Zip Code State 2 6 4 TO G A N W 2 V. Installation Contact (Person to be contacted regarding waste activities at site) (First) Ι NS OLLL R 0 N Job Title Phone Number (Area Code and Number) 414 S P CI E S 9 AL VI. Installation Contact Address (See Instructions) A. Contact Address 10.23 B. Street or P.O. Box Mailing X = A X 0 OX 6 City or Town 15.4 State Zip Code ORGA NIT VII. Ownership (See Instructions) ·---**E** 1241 4 A. Name of installation's Legal Owner V В 0 AR 0 F Т U S Т EE S Street, P.O. Box, or Route Number 0 1 8 KA N AW H BL D Ε S U Ι Т 0 0 á. State City or Town ZIp Code Н Ε S Т (Date Changed) Year C. Owner Type D. Change of Owner Indicator B. Land Type Phone Number (Area Code and Number) Month'

WVU Dailey atheneaum

Please print or type with ELITE type (12 characters per inch) in the unshaded areas only

Form Approved, OMB No. 2050-0028 Expres 10/31/99 GSA No. 0246-EPA-OT

		ID - Far Of	ficial Use Only
VIII. Type of Regulated Waste Activity (Mar	k X in the appropriate boxes. Refe	er to Instructions)	
A. Hazardous We	safe Activity	B. Used	Oil Recycling Activities
a Greater than 1000kg/mo (2,200 lbs.) x to 100 to 7000 kg/mo (220-2,200 lbs.) c Less than 100 kg/mo (220 lbs) Transporter (Indicate Mode in boxes 1-5 below) a. For own waste only b. For commercial purposes Mode of Transportation 1. Air 2. Rail 3. Highway 4. Water 3. Other - specify	2. Treater, Storer, Dispose installation) Note: A pen required for this activity instructions. 4. Hazardous Waste Fuel a. Generator Marketing to 8 b. Other Marketers c. Boller and/or industrial Fuel 1. Smelter Deferral 2. Smell Quantity Examindicate Type of Combu Device(s) 1. Utility Boller 2. Industrial Boller 3. Industrial Furnace 5. Underground Injection Cor	mit is	rial Boiler rial Furnace Transporter - Indicate If Combustion Device(s) orter er Facility Processor/Re-refiner - (ype(s) of Activity(les)
A. Characteristics of Nonlisted Hazardous nonlisted hazardous wastes your installation	•		aracteristics of
1.ignitable 2.Corrosive 3.Reactive 4.		lous waste number(s) for th	Toxicity characteristic
B. Listed Hazardous Wastes. (See 40 CFR 26	11.31 - 33; See Instructions If you ne	ed to list more than 12	waste codes.)
1 2 D O O 1 D O O 2 8 P O 9 8 P O 5 C. Other Wastes. (State or other wastes require	10 0 3 6 U 0 4	5 D 0 0 11 U 1 6	7 P 0 3 0 12 U 1 8 8
2	3	5	6
X. Certification			
I certify under penalty of law that this document a system designed to assure that qualified person person or persons who manage the system, or tho is, to the best of my knowledge and belief, true, ac information, including the possibility of fine and	nel properly gather and evaluate the se persons directly responsible for g curate, and complete. I am aware the	information submitted. jathering the information at there ere significant po	Based on my inquiry of the n, the information submitted
Pon Lollins	Name and Official Title (Type of Row Collins Hazardous Waste Speci		Date Signed
XI. Comments			
Note: Mail completed form to the appropriate EPA	Regional or State Office. <i>(See Sec</i>	ition III of the booklet fo	or addresses.)

Status Charge EVALUATION - VIOLATION - ENFORCEMENT FORM Handler ID Number 12/2000 VERSION Contact Name RESERVED FOR WVR0000 17376 **EPA USE** Jamie Greene Handler Name Daily WVU Hthenaeu City Street Prospect Street Morgantown 284 UNIVERSE CHANGE REQUIRED MES / NO III. Indicate the new transporter status (Mark here only if the I. Indicate the facility's current universe(s): Facility requires a transporter status change): II. Indicate the new RCRIS Generator Universe: Transporter Non-Transporter If the transporter box is checked, Check this box if the facility is (mark only one) you must check at least one of the currently listed in RCRIS as a **NON-HANDLER** LQG CEG boxes below: transporter and no longer SQG CLOSED Mark Mode of Transportation transports hazardous waste. Air Water Rail Other Highway **EVALUATION** Add Change Delete Reason **Branch** Number Type Person **Date** Agency CEF CA MATIN 02 02 06 AREAS OF EVALUATION (E - Evaluated NE - Not Evaluated NA - Not Applicable) DGW DOR DWP BRR **GSC** TWD **FEA GGR** E GSQ DCH DLB DPB DIN **BPS** CSS **GLB** DPP DLF ĎΙΑ BIS **UOR GMR** Ê **GEX** DCL ۴ E **TGR** DCP DSI DPS BCE **UWR** DLT **GOR** E DOP **TMR DFR** DMC DTR **BDT GPT** TOR DGS **DMR** DTT DMI CAS **GRR** Comments OUTSTANDING VIOLATIONS COVERED BY ABOVE EVALUATION **Date Determined** Number Area Number Area **Date Determined** Agency Agency VIOLATION Add Change Delete Link to Above Evaluation? (Y/N) Agency Number Area Class Rég Type Regulation Citation **Returned to Compliance RTC Qualifier** Scheduled **Date Determined** Person Actual Branch Comments: Add VIOLATION Change Delete Link to Above Evaluation? (Y/N) N Number Area Class Reg Type Regulation Citation Agency SR 40 CFR 261,5(9)(3) GPT Réturned to Compliance **Date Determined RTC Qualifier** Scheduled Actual **Branch** Person WV/JAM 12/15/01:02 01 01 Returned to complete Comments:



ACKNOWLEDGEMENT OF NOTIFICATION OF REGULATED WASTE ACTIVITY

(VERIFICATION)

This is to acknowledge that you have filed a Notification of Regulated Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Biennial Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER

WVR000017376

02/18/00

WVU DAILY ATHENEAUM
PD BOX 6551
MORGANTOWN , WV 265066551
RON COLLINS H W SPECIALIST

INSTALLATION ADDRESS

284 PROSPECT ST MORGANTOWN , WV 26506

EPA Form 8700-12A (1/98)